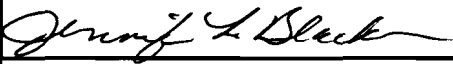
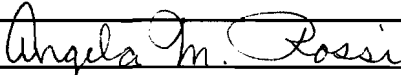


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|--|----------------------|------------------------|--------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br><i>(to be used for all correspondence after initial filing)</i> | Application Number   | 10/584,115             |              |
|  | Filing Date          | August 6, 2007         |              |
|  | First Named Inventor | Malcolm Brown          |              |
|  | Art Unit             | 1796                   |              |
|  | Examiner Name        | Michael F. Pepitone    |              |
| Total Number of Pages in This Submission   |                      | Attorney Docket Number | 39262/330604 |

| ENCLOSURES (check all that apply)  |  |  |
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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>1. Form PTO/SB/08 (21 sheets)<br>2. 32 publications |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;">Remarks</div>   |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |          |       |
|--|---|----------|-------|
| Firm Name                                  | Kilpatrick Stockton LLP   |          |       |
| Signature                                  |  |          |       |
| Printed Name                               | Jennifer L. Blackburn, Ph.D.  |          |       |
| Date                                       | 1-28-09   | Reg. No. | 53994 |

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| I hereby certify that this correspondence is being transmitted to the USPTO by Online EFS Web on the date shown below. |   |      |           |
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| Typed or printed name  | Angela M. Rossi   | Date | 1/28/2009 |

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